

Work Order ID 121694

Thursday, June 26, 2014 3:07:06 PM

121694

Page 1

Item ID: D4871-3 Accept ***N9000040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: End Fitting, Eye
 Start Date: 6/26/14 Start Qty: 90.00 ***90*** Cust Item ID:
 Required Date: 6/26/14 Req'd Qty: 90.00 ***90*** Customer:
 Reference:

Approvals: Process Plan: CL Date: 14/06/30 Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4871	REV A

100 Outsource process - Machining 0.00

100

Outsource5

Memo

0.00

Outsource process - Machining

ISSUE P/O: 24906
 POSSIBLE SUPPLIER:ATG

C OF C IS REQUIRED

105 Receive & Inspect for Damage & Mat'l Certs 0.00

105

Packaging

Memo

0.00

Packaging

110 QC6- Inspect dimensions to drawing 0.00

110

QC

Memo

0.00

Quality Control

CL 14/07/02 90

30x 8014-12-16

(30)

DAS
38
9-89

DEC 16 2014

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 121694

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Page 2

Item ID: D4871-3 Accept ***N9000040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
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Start Date: 6/26/14 Start Qty: 90.00 ***90*** Cust Item ID:
Required Date: 6/26/14 Req'd Qty: 90.00 ***90*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	PURCHASING	0.00							
120									
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <u>24906</u>								
	LPI Per ASTM 1417 LEVEL 2								
	Certificate of conformaty is required								

CL 14/07/08

done @ ATC

130	Receive & Inspect for Damage & Mat'l Certs	0.00							
130									
Packaging	Memo	0.00							
Packaging									

30x SP 14-12-16

140	QC5- Inspect part completeness to step on W/O	0.00							
140									
QC	Memo	0.00							
Quality Control									

(30)

DAS
38
9-89

DEC 16 2014

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 121694

Thursday, June 26, 2014 3:07:06 PM

121694

Page 3


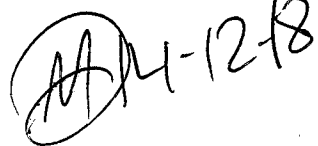
Item ID: D4871-3 Accept *N9000040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
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 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	Identify as per dwg & Stock Location: <u>St/42B</u>	0.00							
180									
Packaging	Memo	0.00							
Packaging	IDENTIFY AS PER QSI 044 6.1								

190	QC21- Final Inspection - Work Order Release	0.00
190		
QC	Memo	0.00
Quality Control		

DAS
86
DEC 17 2014

14/12/18 
 14-12-18

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

July-31-14 11:26:28 AM

Page 1

Work Order ID: 121694

121694

Parent Item: D4871-3

D4871-3

Parent Item Name: End Fitting, Eye

Start Date: 6/26/14

Required Date: 6/26/14

Start Qty: 30.00

Required Qty: 30.00

Comments: IPP REV:A NEW ISSUE 14-01-28 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D4871-3P

Purchased

No

Each

0.0000

30

D4871-3P

End Fitting

30x SP14-12/16

Picklist Print

Page 1

Thursday, June 26, 2014 3:07:06 PM

Work Order ID: 121694

121694

Parent Item: D4871-3

D4871-3

Parent Item Name: End Fitting, Eye

Start Date: 6/26/14

Required Date: 6/26/14

Start Qty: 90.00

Required Qty: 90.00

Comments: IPP REV:A NEW ISSUE 14-01-28 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4871-3P		Purchased		No			Each	0.0000		90			
D4871-3P									**				see prev. sheet.
End Fitting													
M174PH-H900R1.000		Purchased		No			f	127.3000		29.36842			
M174PH-H900R1 000									**				14-7-10
17-4SS H900 ROUND BAR 1.00													

Location

Loc Qty

Loc Code

MAT031

127.3

m126952

22.3

m127334

57

m128314

48

30 ft

[Handwritten signature]

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

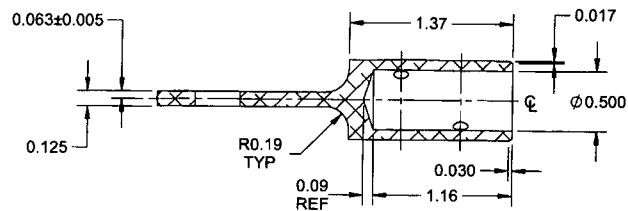
Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

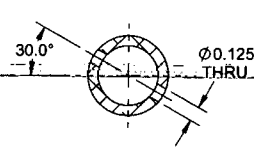
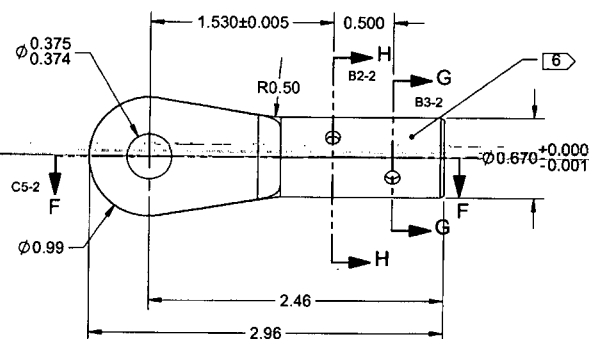
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

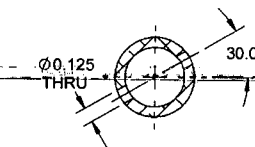
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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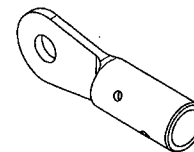
SECTION F-F B7-2



SECTION G-G C5-2



SECTION H-H C6-2



D4871-3 END FITTING, EYE

NOTES:

- 1) MATERIAL: 17-4 PH/S17400/TYP 630 SS ROUND BAR, H900 CONDITION
PER AMS 5643/ASTM A564
DART SPEC M17-4-R
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.11 lbs
- 8) LIQUID PENETRANT INSPECT PER QSI 038 6.1.1 (ASTM E1417 LEVEL 2)

CL 1406130
W/O: 121694

APPROVED

DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	HS	DRAWING NO.	REV. A
MFG. APPR.	JLM	D4871	SHEET 2 OF 2
APPROVED	HS	TITLE	SCALE
DE APPR.	DS	END FITTING	NTS
DATE	13.12.09	<small>COPYRIGHT © 2013 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

RELEASED
2013-12-12



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO24906

Purchase Order Date 7/8/2014

PO Print Date 8/20/2014

Page Number 2 of 8

Order From : VC-ATG001

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

Ship To : DART AEROSPACE LTD
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Contact Name
Vendor Phone 613-446-4544

Ship To Contact
Ship To Phone
Ship Via: VENDOR'S TRUCK
Ship Acct:

Buyer Chantal Lavoie
Customer POID
Customer Tax # 10127-2607
Terms Net 30
Currency CAD
FOB FCA - (Free Carrier)

Line Total: \$3,900.00

1 D4871-3P End Fitting 12/19/2014 FN 30.00
Yes
12/19/2014

✓
Each

\$130.00 \$3,900.00

AS PER DWG D4871-3 REV. A
B121694
MAT: 174PH-H900R 1" M127334

SP14-12-14

Line Total: \$3,900.00

D4884-1P End Fitting, Eye 12/19/2014 FN 16.00
Yes
12/19/2014

✓
Each

\$122.50 \$1,960.00

AS PER DWG D4884-1 REV. A]
B121554
MAT: 174PH-H900R 1.5" M128809

SP14-11-21

Line Total: \$1,960.00

Note:

8/20/2014



A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE STREET
ROCKLAND, ON K4K 1T2
Canada

Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 909316

Date: 16-Dec-14

To

DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY, ON K6A 1K7
Canada

Ship To

CHANTAL LAVOIE
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613 632-9577

Fax: 613 632-1053

Ph: 613 632-9577

Fax: 613 632-1053

Terms		Ship Via	
Quantity	Description		
	PLEASE REFERENCE THE PACK LIST NUMBER ON ALL CORRESPONDENCE TO THIS SHIPMENT. IF YOU HAVE ANY QUESTIONS, PLEASE CALL AT (613) 446-4544.		
24 ea	Part: D4870-1P END FITTING, SMALL Job: 16636	PO: PO24906	Rev: A Line: 1
16 ea	Part: D4805-5P END FITTING Job: 16649	PO: PO24906	Rev: A Line: 14
18 ea	Part: D4869-3P END FITTING, EYE Job: 16650	PO: PO24906	Rev: A Line: 15
30 ea	Part: D4805-3P END FITTING Job: 16652	PO: PO24906	Rev: A Line: 17
10 ea	Part: D4808-1P ROD END Job: 16653	PO: PO24906	Rev: A Line: 18
24 ea	Part: D4869-1P END FITTING, EYE Job: 16654	PO: PO24906	Rev: A Line: 19
24 ea	Part: D4870-3P END FITTING, LARGE Job: 16637	PO: PO24906	Rev: A Line: 2
29 ea	Part: D4871-1P END FITTING Job: 16638	PO: PO24906	Rev: A Line: 3
30	Part: D4871-3P		Rev: A

8214-12-16



F.A.I.

First Article Inspection Report

#

524


Requesting Company:	Dart Aerospace	PO#:	PO24906	Line:	4	Qty:	30
Part Number:	D4871-3P	Rev:	A	Part Description:	End Fitting		
FAI Supplied by:	A.T.G. Industries Inc.	FAI Prepared by:	Emily Louis-Seize	Date:	July 14, 2014		
Qty Inspected:		FAI Inspected by:	Mike Csontos	Date:	December 14, 2014		

Material and/or Special Processes

Type	Description	Specification Number/Code	Certificate of Conformance Number:
Material	17-4SS H900		Supplied by Customer
Special Process	Liquid Penetrant	QSI 038 6.1.1 (ASTM E1417 Level 2)	PO#: 20140501

Inspection Information and Results

Char#	Location	Requirement	Result	UoM	Pass/Fail	Measurement Equipment:	Operation #:
1	D7	.063±.005	.062	inch	Pass	Height Gauge	2
2	D6	1.37	1.365	inch	Pass	Vernier Caliper	2
3	D5	.017	.017	inch	Pass	Comparator	1
4	D5	Ø.500	Ø.502	inch	Pass	Gauge Pin	1
5	C5	.030	.030	inch	Pass	Comparator	1
6	C5	1.16	1.163	inch	Pass	Depth Micrometer	1
7	C6	.09 REF	.092 REF	inch	Pass	Depth Micrometer	1
8	C6	R.19 TYP	R.19	inch	Pass	Radius Gauge	2
9	C7	.125	.124	inch	Pass	Micrometer	2
10	C7	Ø.375/.374	Ø.374	inch	Pass	Gauge Pin	2
11	C6	1.530±.005	1.530	inch	Pass	Height Gauge	3

Inspection Information and Results							
Char#	Location	Requirement	Result	UoM	Pass/Fail	Measurement Equipment:	Operation #:
12	C6	R.50	R.50	inch	Pass	Comparator	1
13	C6	.500	.500	inch	Pass	Height Gauge	3
14	C5	Note 6	✓	n/a	Pass	Visual	3
15	B5	Ø.670+.000/-0.001	Ø.6696	inch	Pass	Micrometer	1
16	B6	2.46	2.457	inch	Pass	Height Gauge	2
17	B6	2.96	2.954	inch	Pass	Vernier Caliper	2
18	B7	Ø.99	Ø.991	inch	Pass	Vernier Caliper	1
19	B3	Ø.125 thru	Ø.125	inch	Pass	Gauge Pin	3
20	B4	30°	30°	degree	Pass	Comparator	3
21	B2	30°	30°	degree	Pass	Comparator	3
22	B3	Ø.125 thru	Ø.125	inch	Pass	Gauge Pin	3
First Article Inspection Report Approved and Completed in Full by:							
				Date: 15-Dec-14			



skyservice Work Order Traveler



Sky Service F.B.O. Inc.

DOT APP 53-89 / EASA 145.7142 / BDA AMO 385

WO #: MWO23016	Customer: ATG Industries Inc	Dept: NDT YUL	Reference: 20140501
Descr:	PN:	S/N:	Qty: 1
Make:	Model:	Reg:	A/C S/N:
TSN:	CSN:	TSO:	
Task: UNSCHEDULED			Sequence: 4

Work Required:

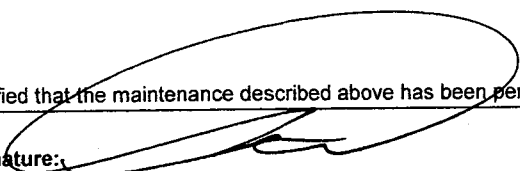

CARRY OUT NDT ON 30 END FITTING P/N D4871-3P AS PER PO: 20140501

Action Taken:	Date:	Initial/Stamp:
LPI C/O IAW ASTM E-1417M-13 ***NO CRACK FOUND*** PEN.(ZL-37 , B#10A070), DEV.(SKD-S2,B#13D14k) , EMU.(ZR-10B,B#10A074).	DEC 10 2014	 

Description	Location	P/N	Qty	Batch	S/N Off	S/N On

COPY

I certified that the maintenance described above has been performed in accordance with the applicable standard of airworthiness.

Signature: 	ACA/SCA Stamp 	Date: DEC 10 2014
Name: RAFIK MELIKJIAN		